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DEPARTMENT OF PUBLIC HEALTH NURSING

IN CHARGE OF

EDNA L. FOLEY, R.N.

PUBLICITY AND PUBLICATIONS.—Many associations make the serious mistake of not giving their work adequate publicity. In fact, it is extremely difficult now to get an accurate history of early public health work in the United States, although it is less than thirty years old, because few of the pioneer associations kept any sort of annual records. Money spent for an annual report is good bookkeeping, it shows the public what its money is doing and it also keeps the association up to the mark, for no honorable association can produce an interesting report if good work hasn't been done.

Once having made a report, however, the next thing is to get it before the public. Various schemes are devised for this; in small cities and towns the only kind of report ever made is usually that published in the columns of the local newspapers. It is a good idea, however, to have some sort of a report published at home by the association doing the work. Nurses working alone or in small isolated communities would do well to have a large number of such exchanges on their lists. They should send their own report to twenty or thirty similar or different organizations, asking the courtesy of an exchange in return.

When a nurse sees something worth copying in the report of another association, she ought not to hesitate to borrow on the spot, whether it is something that will make her day's work more efficient or her next annual report more interesting. Most of our reports are compilations of good things borrowed from other sources, and coöperation should exist throughout social work, not merely when one is considering district case work.

To run through a pile of interesting annual reports or publications is a liberal education for a nurse who has become pretty well satisfied with her own efforts or who has become so discouraged that she wonders if her work is worth while. All of the reports are similar and yet each one is different from its predecessor. Some are devoted to general work, others to tuberculosis, some are got out by state boards of health, others by privately managed and supported organizations, nevertheless it is a poor report that hasn't some idea in it which a reader can use to good advantage.

How many of our nurses, for instance, know the Public Health Bul-

letin No. 77, published in June, 1916, by the Government Printing Office, entitled "Rural School Sanitation, including Physical and Mental Statistics of School Children in Porter County, Indiana." It is almost a text-book on the inspection, supervision and maintenance of rural schools and can be secured free of expense, from the Government. Another equally valuable government pamphlet is a recent publication by the Children's Bureau, on "Rural Obstetrics," by Dr. Grace L. Meigs. These are papers which no nurse doing work with mothers and children can afford not to read, for the conditions in Porter County and the conditions as stated by Dr. Meigs are repeated in hundreds of places in the United States.

Nurses doing tuberculosis work will be immensely interested in the report of the Michigan State Board of Health Tuberculosis Commission. In 1915, the legislature of Michigan appropriated \$100,000 with which to make an active fight against tuberculosis. For the first time in our history, a state board of health mapped out an eighteen-months' campaign which was planned to cover every city, county, township and village in the entire state. The work was done popularly, in order to reach the people; it was done scientifically, by some of the best men in tuberculosis work in Michigan and elsewhere; its organization was known as the "Health First" party and was composed of doctors, several diagnosticians, a housing survey expert, a lecturer, twelve visiting nurses and a publicity agent. Its work was so planned that three weeks were spent in each county visited, and so scheduled that the last week in one county was identical with the first week in the next, so that two counties could be covered during one month. During the first week a nurse or nurses went out on scouting parties to prepare the territory for the visits of the traveling clinic, the lecturer and housing expert. Later, an active tuberculosis exhibit and campaign was waged for two weeks, clinics were held for physicians as well as for patients, and a very great deal of publicity given the activities of the commission. Much splendid work has been done and the reports of what one state has accomplished should stimulate other states to do likewise.

The bulletin of the Michigan Anti-Tuberculosis Association for June, 1916, contains a report of the organization of this committee and also a report of the state visiting nurse, Mary Carter Nelson. Reading Miss Nelson's report, one wonders how she covered so much territory, but as we read that use was made of Camp Fire Girls, Boy Scouts, women's clubs, town halls, public schools, health commissioners, and every type of individual and organization known in Michigan, her results are not surprising, but Miss Nelson is to be congratulated on the splendid organization of her year's work.

INDIANA.—In addition to the interesting federal report of rural school conditions in Porter County, Indiana, a report of interest to public health nurses is the thirty-fourth annual report of the Terre Haute Society for Organizing Charities, which contains the first annual report of the Public Health Nursing Association of Terre Haute. For some time it seemed as if Terre Haute would never get any sort of a district nursing association, but by persistent activity and interest on the part of the women's clubs and several graduate nurses, by means of public meetings, and finally, by affiliation, in order to help bear the expense, with the Anti-Tuberculosis Society, the Metropolitan Life Insurance Company, an industrial corporation, and public memberships, the organization has become an actual fact, with an incorporated body and four nurses actively engaged in the work. Lillian Rose (Englewood Hospital, Chicago), is its superintendent. No city, county or rural community is too small to have its public health nurse if a handful of people in the community are determined to have this work done and done well. Nurses who are beginning to get discouraged on this subject are advised to follow the example of the workers in Terre Haute.

PENNSYLVANIA.—The 1916 annual report of the Visiting Nurse Society of Philadelphia, Katharine Tucker, superintendent, shows that the organization has made a remarkable growth in the past year, having increased its staff by ten nurses, opened a teaching department for new nurses, and by means of supervisors' and staff conferences, brought the nurses very closely together. The report is of particular interest in its physical make-up. It is one easily and quickly read, it is interesting and it makes a good impression when first taken out of its envelope. Sherman C. Kingsley is quoted as having once said that it was his ambition, when getting up an annual report, to make one that would keep out of the recipient's waste basket. There is no doubt but that the Philadelphia 1916 report will not only keep out of its readers' wastebaskets but that it will be read from cover to cover more than once and its form and style borrowed in a good many 1917 reports elsewhere.

ILLINOIS, ALTON.—Charlotte Todd (West Side Hospital, Chicago), has been the community nurse in Alton for nearly a year. She was the first public health nurse to be engaged there and now the work has so increased that she has an assistant, Anna Condy (St. Joseph's Hospital, Alton).

CHICAGO.—The 1916 report of the Infant Welfare Society of Chicago, Minnie Ahrens (Illinois Training School, Chicago), superintendent, keeps up its early reputation of being one of the best prepared, best looking baby-welfare reports published in the country. Its illustrations are excellent, it is hardly necessary to read the text, the

work is so well described by the pictures. Nevertheless, the reports are well worth reading, particularly those of the Women's Auxiliary. The Infant Welfare Society is fortunate in having a Women's Auxiliary with a very large membership, divided into various groups or circles which, in turn, support different conferences. It raised over \$24,000, a sum supporting, approximately, twelve sub-stations. The members of the auxiliary take a remarkable personal interest in their conferences and it is safe to predict that much of the intelligent, coöperative infant welfare work being done in the city of Chicago is due to the fact that a very large body of lay-women as well as a group of directors and public health nurses, are interested in seeing that every baby gets a fair start.

On Sunday evening, August 19, Base Hospital No. 2, France, received word that Miss Beatrice MacDonald, a graduate of the New York City Hospital, and a member of the Presbyterian Hospital Unit, had been struck with a bomb when the Casualty Clearing Station was raided. Monday morning, it was learned that Miss MacDonald had lost her right eye, a fragment of shrapnel penetrating the cheek and lower eyelid and entering the ball of the eye. Before going to France, Miss MacDonald had been in the office of Dr. Brewer. He wrote us that she was totally blind in her right eye from the time of the injury.

Miss MacDonald was struck with the bomb on the night of August 17, but no word reached us until the 19. In the account then received we learned that about two o'clock in the morning three bombs fell within a few seconds of each other, one falling just behind the nurses' tent. Two English Sisters received slight injuries. Another bomb demolished the cook house, about thirty yards from Dr. Brewer's tent. An English Officer and several orderlies were killed, and several men terribly wounded. Dr. Brewer did not know the complete list of casualties as the roll-call was not taken until after his departure.

As a train was on the siding ready to leave, Miss MacDonald was taken on and sent at once to Boulogne. Dr. Lister's Hospital received her, where she is in good hands, as Colonel Lister is probably the best oculist in England. Dr. Brewer accompanied Miss MacDonald to Boulogne, and wrote that he would stay until after the arrival of her brother, Lieutenant Colonel MacDonald, who is attached to a Canadian Field Ambulance.

A message came from Headquarters on Monday, August 27, that Miss MacDonald's right eye had been removed and that she was doing well. This is the latest information to be had. She is at present in No. 83 General Hospital, Boulogne. We hear that Miss MacDonald is very plucky in this misfortune. She has been splendid during her connection with the Unit. As her influence has always been toward the upholding of high standards, she has been a help in every way. All who worked with her appreciate her fine character.